10/589621 **IAP6 Rec'd PCT/PTO** 16 AUG 2006

Application Data Sheet

Application Information

Application Type:: National Stage

Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0

Title:: THE USE OF O-ATP FOR THE

TREATMENT OF DISEASES INVOLVING

ANGIOGENESIS

Attorney Docket Number:: 2503-1228

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::
Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Appl	i	can	t	Information
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Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: MARIA
Middle Name:: ELENA
Family Name:: FERRERO

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIA MONTE ROSA, 19,

Address::

City of Mailing Address:: MILANO

State or Province of Mailing Address::
Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20149

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/EP2005/001458	2/14/05

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
ITALY	MI2004A000255	2/17/04	

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::